



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM  
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 20-8390  
DATE PAID: 5/21/20  
FEE PAID: 318.50  
RECEIPT #: 1505417

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative  
☒ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Adam Con Grp Inc

AGENT: Robert W. Ford North Florida Septic Tank Inc;

TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE State Road 100 Lake City, Fla 32025

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 21 BLOCK: — SUBDIVISION: Cannon Creek Acres PLATTED: —

PROPERTY ID #: 24-48-16-031A-121 ZONING: — I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 0.51 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: — FT

PROPERTY ADDRESS: 130 Haver Hill Elm

DIRECTIONS TO PROPERTY: take SW Sisters Welcome Rd to SW Kicklighter, take SW Emerald Conner Dr to SW Arrowbend +/L to Haver Hill +/L to End on (R)

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>new home</u>	<u>3</u>	<u>1580</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) —

SIGNATURE: Roddy D 7

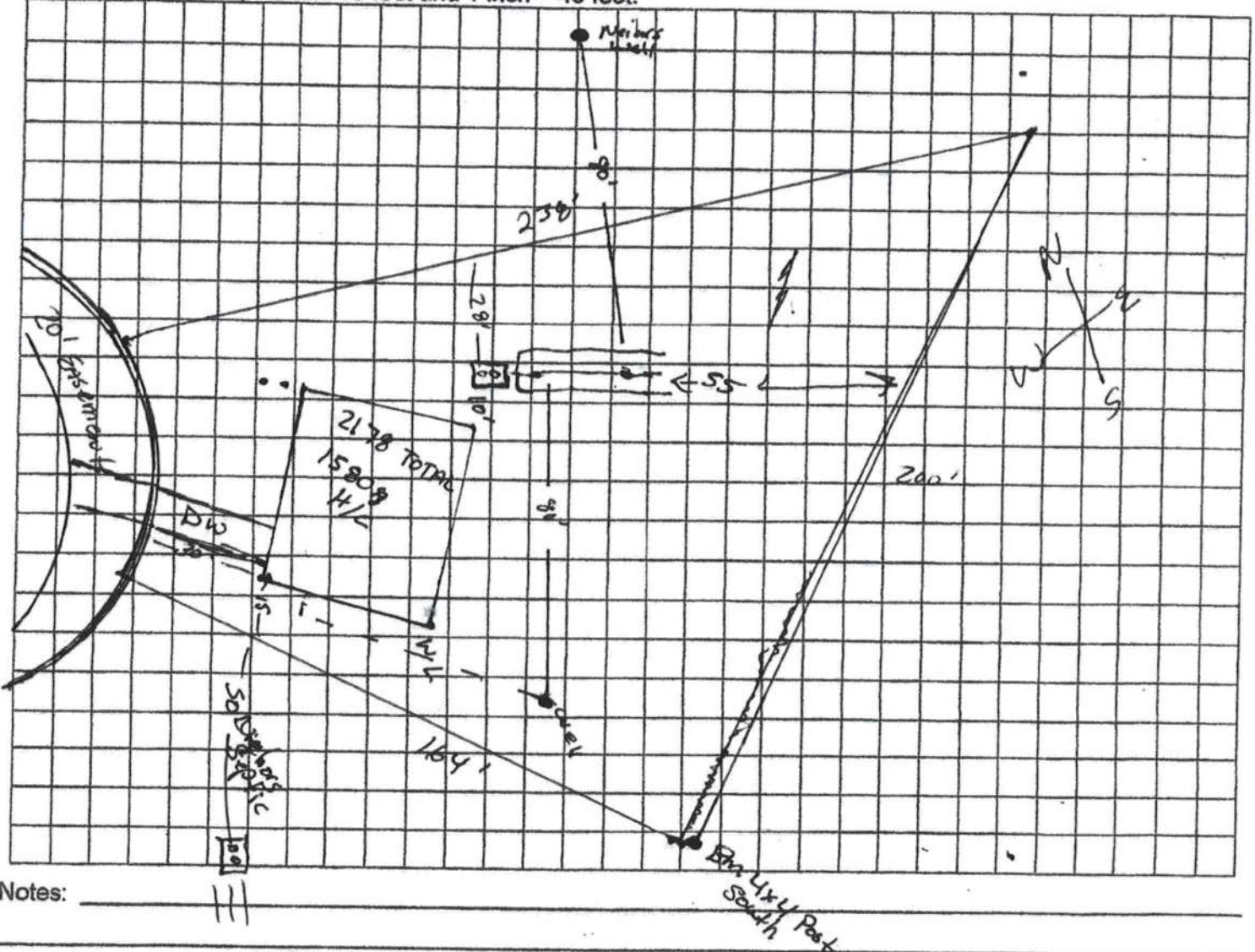
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Permit Application Number 20-0390

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: \_\_\_\_\_

Site Plan submitted by: Rolando W. Ford III DATE 5/20/20

Plan Approved X

Not Approved \_\_\_\_\_

Date 5/26/20

By \_\_\_\_\_

County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**